



## PART B - FEE(S) TRANSMITTAL

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

ORRICK, HERRINGTON & SUTCLIFFE, LLP  
666 Fifth Avenue  
New York, New York 10103-0001

02/14/2005 MBERHE1 00000092 150665 09994978

01 FC:1501 1400.00 DA  
02 FC:1504 300.00 DA  
03 FC:8001 30.00 DA

Yolanda Bonilla (Depositor's name)  
Yolanda Bonilla (Signature)  
February 8, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/994,978	11/27/2001	Christine HENRY	8707-2133	2854

TITLE OF INVENTION: DISCRIMINATION OF ATRIAL FIBRILLATIONS FOR AN ACTIVE IMPLANTABLE MEDICAL DEVICE, IN PARTICULAR A DEFIBRILLATOR/CARDIOVERTOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DUE DATE
Nonprovisional	NO	\$1370	\$300	\$1670	02/14/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
Jastrzab, Jeffrey R.	3762	607-014

1. Change of Correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Orrick Herrington &  
2. Sutcliffe, LLP  
3. \_\_\_\_\_

### 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)  
Montrouge, FRANCE

ELA Medical S.A.

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee  
☐ Publication Fee  
☒ Advance Order - # of Copies 10

4b. Payment of Fee(s)

☐ A check in the amount of the fee(s) is enclosed  
☐ Payment by credit card. Form PTO-2038 is attached  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 15-0665 (enclose an extra copy of this form).

### 5. Change of Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the application; a registered attorney or agent; or the assignee or other party in interest as shown by records of the United States Patent and Trademark Office.

Authorized Signature Rodger A. Sadler

Date February 8, 2005

Typed or Printed name Rodger A. Sadler Esq.

Registration No. 53,315

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is the file (and by the USPTO to process) as application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.